## Am I addicted to drugs or alcohol?

Take the self-assessment below to find out.

Please think about your life in the past 12 months. Then go through the questions below and answer 'yes' or 'no' for each one, in relation to your drug or alcohol use.

## In the last 12 months...

1.	Did using the same amount of the drug have less effect than it used to? Or did you have to use more to feel the effect you wanted? Please answer 'yes' if either question is true for you.	No	Yes
2.	Did you have withdrawal symptoms when you weren't using the drug? Or did you use the drug to avoid having these symptoms? Please answer 'yes' if either question is true for you.	No	Yes
3.	Did you have times when you used the drug more or for longer than you wanted to?	No	Yes
4.	Did you want to cut back and stop using the drug, but couldn't?	No	Yes
5.	Did you spend a lot of time trying to get the drug, using the drug, or recovering from using it?	No	Yes
6.	Did you continue to use the drug even though you thought it might be causing mental or physical problems – or making them worse?	No	Yes
7.	Did using the drug make it harder for you to keep up with your responsibilities at work, school, or home?	No	Yes
8.	Did you do something dangerous more than once after using the drug – like drive a car or operate machinery?	No	Yes
9.	Did you use the drug even though you thought it might be causing problems with your family or other people?	No	Yes
10.	Did you have strong desires or craving for the drug?	No	Yes
11.	Did you spend less time working, enjoying hobbies, or being with others because of your use of the drug?	No	Yes
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These questions have been reproduced from a Substance Use Symptom Checklist developed by researchers from the Kaiser Permanente Washington Health Research Institute<sup>1</sup> based on the eleven *Diagnostic and Statistical Manual for Mental Disorders*, 5<sup>th</sup> Edition (DSM-5)<sup>2</sup> criteria for Substance Use Disorder.

If you answered 'yes' to at least 2 of the above questions, you might have an addiction to drugs or alcohol.

Note: these questions are not a substitute for a comprehensive assessment and diagnosis by a trained mental health professional. If you (or someone you know) identify with any of the symptoms above, please book a consultation with our clinical team today.

## **References:**

<sup>1</sup>Matson, T. E., Hallgren, K. A., Lapham, G. T., Oliver, M., Wang, X., Williams, E. C., & Bradley, K. A. (2023). Psychometric Performance of a Substance Use Symptom Checklist to Help Clinicians Assess Substance Use Disorder in Primary Care. *JAMA Network Open*, *6*(5), e2316283-e2316283.

<sup>2</sup>American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: American Psychiatric Publishing.